

Utah Department of Environmental Quality Division of Solid and Hazardous Waste Mailing Address: P.O. Box 144880, Salt Lake City, Utah 84114-4880

Annual Used Oil Handlers Report Transporter/Transfer Facility Instructions

All used oil handlers must submit an annual report to the Division no later than **March 1**st for the previous calendar year's used oil activities.

(Separate forms must be used for **Off-Specification Burner** facilities and **Processors/Re-refiners**)

Please complete ALL applicable sections.

If you have questions about how to complete this report, please call the Used Oil Program at (801) 538-6170

Part I. General Information

- **Box A.** Please provide the company name and note if there are any changes in ownership in Part II below
- Box B. Please provide name and title of current company contact
- **Box C.** Please provide the company's mailing address
- **Box D.** Please provide the permitted facility's physical address
- **Box E.** Please provide the Utah Used Oil Permit Number which may be found on your used oil permit (e.g., UOP-123-97)
- **Box F.** Please provide the permitted facility's site-specific federal EPA ID Number (e.g., UTR00056789)
- **Box G.** Please provide the phone number of the current company contact
- Box H. Please provide the Fax number of the current company contact
- Box I. Please provide the e-mail address of the current company contact

Part II. Used Oil Information

Section A. Operational Status

R315-15-13.4(e) of the Used Oil Management Rules requires that the owner or operator of the facility shall notify the Executive Secretary in writing of any changes in the information submitted in the approved permit application within 20 days of the changes.

Please check the "yes" or "no" box to indicate if there have been any changes in your current approved permit and provide a written detailed description of all changes. Examples of changes that must be reported include whether or not your facility is operational or closed, any changes in company name or ownership, any changes in the facility location, mailing address, individual contacts, phone/fax numbers, e-mail addresses, or modifications to the approved list of equipment or process operations.

Section B. Incoming Used Oil

Used oil includes lubricants, synthetic oils, refrigeration and compressor oils, mineral or dielectric oils, transmission, brake and hydraulic fluids, and heat transfer fluids. A used oil generator is any person, by site, whose act or process produces used oil or whose act first causes used oil to become subject to regulation. Permitted used oil facilities include used oil transporters, transfer facilities, processors, re-refiners, and off-spec burners. For a list of Utah permitted used oil facilities please see http://www.usedoil.utah.govPermittedUsedOilFacilities.htm.

- **Line 1.** Please report the volume of used oil collected from **all Utah generators** who are \underline{NOT} **permitted used oil facilities**.
- **Line 2.** Please report the volume of used oil collected from **ALL out-of-state generators**.
- **Line 3.** Please report the volume of used oil collected/transferred from **ALL OTHER Utah permitted used oil facilities**.
- **Line 4.** Please list all Utah permitted used oil facilities from which used oil was **received.** Indicate the type of facility (transporter, transfer facility, processor, or re-refiner), the name of the facility, the address and phone number of the facility, **and** the volume of used oil collected/transferred from the facility. Use additional sheets if necessary and provide a subtotal volume from the additional sheets in **Box 4.a**.

Section C. Outgoing Used Oil

Line 5. Please report the total volume of used oil delivered to **Utah permitted used oil facilities**. A current list of Utah permitted facilities can be found at http://www.usedoil.utah.govPermittedUsedOilFacilities.htm.

Line 6. Please provide a list of all Utah permitted used oil facilities to which used oil was delivered. Indicate the type of facility (**transfer facility, processor, re-refiner, or burner**), the name of the facility, the address and phone number of the facility, **and** the volume of used oil delivered to each facility. Use additional sheets if necessary and provide a subtotal volume from the additional sheets in **Box 6.a**.

Line 7. Please report the total volume of used oil delivered to out-of-state facilities.

Line 8. Please list all out-of-state facilities to which used oil was delivered. Indicate the type of facility (**transfer facility, processor, re-refiner, or burner**), the name of the facility, the address and phone number of the facility, **and** the volume of used oil delivered to the facility. Use additional sheets if necessary and provide a subtotal volume from the additional sheets in **Box 8.a**. **Line 9.** Please provide the total volume of used oil delivered/transferred to **other Utah**

permitted used oil transporters. A current list of Utah permitted facilities can be found at http://www.usedoil.utah.govPermittedUsedOilFacilities.htm.

Line 10. Please list each Utah permitted used oil transporter, their name, phone number **and** the volume of used oil delivered to each transporter. Use additional sheets if necessary and provide a subtotal volume from the additional sheets in **Box 10.a**.

Section D. Used Oil Filters

This section is optional. However, if the information is available it would be very helpful in assessing the status of used oil filter collection and management in the state of Utah.

- One 55-gallon drum of crushed used oil filters equals approximately 400 filters
- One 55-gallon drum of uncrushed used oil filters equals approximately 250 filters
- One ton of drained used oil filters equals approximately 2,350 filters

Line 11. Please report the number of used oil filters collected/generated during the reporting year **Line12.a.** Please report the quantity of used oil filters transferred to another Utah permitted used oil facility and/or out-of-state used oil facility.

Line 12.b. Please report the quantity of used oil filters transferred directly to a Utah waste-to-energy facility and/or out-of-state waste-to-energy facility.

Line 12.c. Please report the quantity of used oil filters transferred directly to a Utah metal foundry and/or out-of-state metal foundry for recycling.

Line12.d. Please report the quantity of used oil filters disposed at a Utah or out-of-state landfill. **Line 13.** Please provide the total quantity of Utah and/or out-of-state disposed used oil filters (the sum of lines 12. a. – d.)

Line 14. Please provide a description of how and where the used oil filters were managed.

Part III. General Liability Insurance Information

Box A. Please provide a current ACORD form, or equivalent information, from your insurance broker/agent **OR** complete the information in **Boxes B through I** if no ACORD is provided.

If no ACORD is provided, please complete the following Boxes B through I.

- **Box B.** Please provide the name of the insurance company listed on the policy.
- **Box C.** Please provide the mailing address of the insurance company.
- **Box D.** Please provide the name of the insurance broker/agent.
- **Box E.** Please provide the phone number of the insurance broker/agent.
- **Box F.** Please provide the coverage types and amounts of the insurance policy.
- **Box G.** Please provide the insurance policy number.
- **Box H.** Please provide the effective date of the insurance policy.
- **Box I.** Please provide the expiration date of the insurance policy.

Part IV. Environmental Pollution Liability Insurance for Third-Party Damages

- **Box A.** Please provide a current ACORD form, or equivalent, from your insurance broker/agent **OR** complete the information in **Boxes B, C, and D1 through D7** if no ACORD is provided.
- **Box B.** Transporters are <u>only</u> required to have sudden insurance coverage. Please provide the coverage amounts.
- **Box C.** Transfer facilities are required to have sudden insurance coverage and if applicable, non-sudden insurance coverage. <u>If used oil storage tanks are not elevated above the ground surface</u>, (i.e., tanks sit directly on concrete and are not raised so that visible inspections cannot be performed under the tanks to determine if any leaks are occurring) **then non-sudden insurance coverage is also required**. Some insurance companies may require combined sudden and non-sudden coverage. Please indicate coverage type and amounts.
- **Box D.1.** Please provide the name of the insurance company.
- **Box D.2.** Please provide the mailing address of the insurance company.
- **Box D.3.** Please provide the name of the insurance broker /agent.
- **Box D.4.** Please provide the phone number of the insurance broker/agent.
- Box D.5. Please provide the insurance policy number.
- **Box D.6.** Please provide the policy effective date.
- **Box D.7.** Please provide the policy expiration date.

Part V. Financial Assurance Information for Cleanup and Closure Costs

Section A. Type of Financial Assurance Mechanism

Financial assurance is **only** required for Used Oil Transfer Facilities, not Used Oil Transporters. A Standby Trust Agreement is also required with a Letter of Credit, a Payment Bond, and an Insurance Policy. Please check the box representing the type of financial assurance mechanism in place for your facility, provide the financial instrument control number (this is a unique identifying number for the document), and the present value of the instrument.

Section B. Closure Cost Estimate Adjustment

Clean up and closure cost estimates must be updated annually. They may be adjusted by using an inflation factor or by recalculating the maximum costs of cleaning and closing the facility in current dollars. Select ONE of the methods of cost estimate adjustment below.

Method 1- Inflation Factor Adjustment. This method for adjusting the closure cost estimate due to inflation may only be used when a Division approved closure cost estimate exists **and no changes have occurred** in the facility operation that would necessitate a modification to the closure plan and hence, the approved permit. Multiply last year's adjusted Closure Cost Estimate by the published 2006 inflation factor of 1.025 to determine the new Total Closure Cost adjusted for inflation. Please call the Division's Used Oil Program if you are not sure what figure to use for last year's closure cost estimate.

Method 2 - Recalculated Engineering Closure Cost Estimate. This method may be used to recalculate the total clean up and closure costs when the extent and manner of the operation has changed such that clean up and closure would have changed (increased or decreased). Either a third party estimate/price quote or a Utah-certified professional engineer s clean up engineering estimate must be provided for each item in the approved permit closure plan, including all changes to the facility. Third party costs of all materials and labor must be included in the estimate. This method requires detailed information to be submitted to the Division as a permit modification and approval is required by the Executive Secretary of the Solid and Hazardous Waste Control Board.

Section C. Financial Assurance Closure Cost Summary

Please fill in the instrument value from Part V, Section A above, and the total closure cost from either Method 1 or Method 2 in Section B above and subtract the closure cost from the instrument value. If the total closure cost is greater than the instrument value, resulting in a negative number as the difference, then the instrument value is under-funded by that amount and must be increased to equal or exceed the total closure cost. A written notice from the issuer of the financial mechanism documenting the necessary increase in the instrument value must be submitted to Dennis Downs, Executive Secretary, Utah Solid and Hazardous Waste Control Board, P.O. Box 144880, Salt Lake City, Utah, 84114-4880 **no later than March 1st**. To avoid possible administrative fees assessed by the issuer for modifying your financial mechanism on an annual basis, the Division recommends that you consider increasing the instrument value to allow for several years of inflation.

Part VI. Certification

The company owner, or designated representative, must complete this section, sign and date it, and mail to Used Oil Program, Division of Solid and Hazardous Waste, P.O. Box 144880, Salt Lake City, Utah, 84114-4880 **no later than March 1st**, to avoid possible administrative penalties.



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Separate forms must be used by **Off-Specification Burner** facilities, and **Processors/Re-refiners**

Please read attached instructions before completing all applicable sections of the report.

If you have questions about how to complete this report,

call the Used Oil Program, (801) 538-6170

Reporting year: 2008

I. GENERAL INFORMATION (Please verify and update the information on your approved used oil permit) A. Company Name E. Utah Used Oil Permit Number: (Ex: UOP-123-97) B. Contact Name and Title F. Federal EPA ID Number: (Ex: UTR000056789) C. Company Mailing Address G. Contact Phone Number H. Contact FAX Number D. Permitted Facility's Physical Address I. Contact E-mail Address II. USED OIL INFORMATION (Please review your approved permit, and document all changes in information. operations, or equipment) A. OPERATIONAL STATUS (Reference: R315-15-13.4(e), Utah Administrative Code states "The owner or operator of the facility shall notify the Executive Secretary in writing of any changes in the information submitted to apply for a permit within 20 days of the change.") Have there been any changes in your operations as compared to your current approved permit? Please see instructions for examples of possible changes that should be documented below. No ____ Yes _____ If yes, describe the changes below (or attach a separate sheet). **Description of Changes:**

Continue to next page

B. INCOMING US (Please see instructions for	Gallons
1. Total volume of used	Guilono
2. Total volume of used	
3. Total volume of used (i.e., transfer facility, proc See	

continue to next page

9. Total volume of used of	il delivered (transferred) t	to other Utah	n perm	itted transpo	orters (insert total here ► and itemize below)	
10. List of other Utah pe (Attach additional sheets				vere made.		
Туре	Name	Address/	/Phone)		Gallons
Transporter						
Transporter						
Transporter						
Transporter						
a. Enter subtotal from any additional sheets here ▶						
D. USED OIL FILTERS (Section D is Optional – but requested if information is available) (One 55-gallon drum of <i>crushed</i> used oil filters = approximately 400 used oil filters) (One 55-gallon drum of <i>uncrushed</i> used oil filters = approximately 250 used oil filters) (One ton of drained used oil filters = approximately 2,350 used oil filters)						Number
11. Number of used oil filt	ers collected/generated	during the rep	orting	year		
12. Disposition of collected used oil filters					Number In-state	Number out-of-state
a. Quantity transferred to another permitted used oil facility						
b. Quantity transferred directly to a waste-to-energy facility						
c. Quantity transferred directly to a metal foundry for recycling						
d. Quantity disposed at a landfill						
13. Total quantity of disposed used oil filters (sum of 2a, 2b, 2c and 2d)						
14. Describe how and wh	nere the used oil filters w	ere managed	l			
III. GENERAL LI						
A. Please attach a currer information below:	nt ACORD form or equi	•			, .	the following
B. Name of Insurance Company on Policy			D. Name of Insurance Broker/Agent			
C. Physical Address of Insurance Company				E. Phone Number of Insurance Broker/Agent		
F. Coverage Types and A	mounts					
G. Policy Number						
H. Effective Date I. Expiration Date						

IV. ENVIRONMENTAL POLLUTION LIABILITY INSURANCE FOR THIRD-PARTY DAMAGES

(Transfer Facilities may need both sudden and non-sudden coverage)

A. TRANSPORTERS AND TRANSFER FACILITIES:

Please attach a current ACORD form or the equivalent, OR provide the following information about the company providing your environmental pollution liability insurance

ACORD or equivalent attached: YES [] or No []

B. TRANSPORTERS

Please check and complete coverage types and amounts: (Example: \$1,000,000/\$2,000,000 or greater)

☐ Sudden

Occurrence Maximum: \$_____

Annual Aggregate: \$

C. TRANSFER FACILITIES

Please check and complete coverage types and amounts: (Examples: \$2,000,000/\$4,000,000 or greater)

 \square Sudden (required of all transfer facilities)

Occurrence Maximum: \$_____

Annual Aggregate: \$_____

☐ **Non-sudden** (required if tanks are not elevated)

Occurrence Maximum: \$_____

Annual Aggregate: \$

OR (if required by insurance company)

☐ **Combined** (sudden plus non-sudden)

Occurrence Maximum: \$_____

Annual Aggregate: \$_

D. INSURANCE INFORMATION

- 1. Name of Insurance Company
- 2. Mailing Address
- 3. Name of Insurance Broker/Agent
- 4. Phone Number of Insurance Broker/Agent
- 5. Policy Number
- 6. Effective Date
- 7. Expiration Date

continue to next page

V. FINANCIAL ASSURANCE INFORMATION FOR CLEANUP AND CLOSURE COSTS (Not required for Transporters, but applicable to Transfer Facilities.)						
A. Type of financial assurance mechanism (check only one): □ Letter of Credit* □ Payment Bond* □ Insurance Policy* □ Trust Fund * Indicates mechanisms that also require use of a Standby Trust Agreement						
Financial Instrument Control No. (unique identifying number of document):						
Dollar amount of financial assurance provided by this financial instrument: \$						
B. Closure Cost Estimate Adjustment: (Please read instructions thoroughly before checking and completing either Method 1 or Method 2 below, then complete Section C.)						
□ Method 1. Inflation Factor Adjustment						
Last Year's Closure Cost Estimate (Call the Used Oil Program if you are not sure what number to use) x 1.0239 = TOTAL CLOSURE COST for use during 2008 Reporting year Adjusted for Inflation						
□ Method 2. Recalculated Engineering Closure Cost Estimate RECALCULATED ENGINEERING CLOSURE COST ESTIMATE: \$ TOTAL CLOSURE COST Note: This method requires detailed information to be submitted and approved by the Executive Secretary of the Solid and Hazardous Waste Board. Any change in the facility or process requires a permit modification to be submitted to the Executive Secretary for review and approval.						
C. Financial Assurance Closure Cost Summary						
\$ \$ = \$* INSTRUMENT VALUE						
*If the difference is a NEGATIVE number, the instrument value is under-funded and needs to be increased to equal or exceed the newly calculated Total Closure Cost. A written notice of the increase is required no later than March 1st from the issuer of the financial mechanism to the Division.						
VI. CERTIFICATION						
The Company owner or his/her designated representative must sign this form.						
I certify under penalty of law that this report and all attachments were prepared by me or under my direction or supervision. The information submitted is to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of a fine and imprisonment for knowing violations.						
Name Title						
Signature Date						
UO FORM 004 (revised 2008)						